(954) 523-2030 Daytime Phone #

02-09-00

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000055726											
1. Entity Name WALDRON ENTERPRISES, INC.							pres (#			
						■ 情報のは私のにULA					
						00 FEB -8 PH 2: 17					
Principal Place of Business 2511 SW 2ND AVENUE		2511 SW 2ND AVENUE					SECRE		STATE		
FORT LAUDERDALE FL 33315		FORT LAUDERDALE FL 33315-3113				SECRÉTA : F STATE TABLAHASSEE, FLORIDA					
						/ 100410 6 1 14 0	JORRA (SIM DAM) AARI	ABIIR EBIBI BII	ai a igh 2 80 2 5 m	AIR AIRI I sa i	
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.					DO NOT WRI	TE IN THIS S	PACE		
07. 1.01		City & Ctato				EE(M) walk as			1 14	policed For	
City & State		City & State			4.	. FEI Number	65-043282	1		oplied For ot Applicable	
Zip	Country	Zip	Count	try	5.	Certificate of	Status Desired		\$8.75 Add Fee Require		
	6. Name and Address of Current R	egistered Agent			7.	Name and Ad	Idress of New R				
				Name							
	irison, stephen b • S.W. 2ND AVE.			Street Address (P.O. Box Number is Not Acceptable)						İ	
	T LAUDERDALE FL 33315										
				City				FL	Zip Cod	e	
8. The above	named entity submits this statement for	the purpose of changing its re	gistere	ed office or re	egistered a	agent, or both, i	n the State of Flo	orida.			
SIGNATURE .	Signature, typed or printed name of registered agent and	d title if applicable. (NOTE: F	Registered	d Agent signature	required when	reinstating)		DATE			
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00						10. Election	on Campaign Fir	ancina	\$5.0	O May Be	
-	equirement and elects to do so. ia on back)	After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta					und Contributio			to Fees	
11.	OFFICERS AND D	IRECTORS	12.		Д	ADDITIONS/CH	IANGES TO OFF	ICERS AND			
TITLE NAME	SVPD WALDRON, DON L.	☐ Delete	TITLE		Assis	st Sec/Ti	ceas		☐ Change	X Addition	
STREET ADDRESS	2511 SW 2ND AVENUE			ET ADDRESS		ey A Kar Sฟ 2ND.					
CITY-ST-ZIP	FORT LAUDERDALE FL			-ST-ZIP	_ÉŎŔĬ_	LAUÑERDA	NLF, FL.	<u> 33315</u>		Mddition .	
TITLE NAME	COBD Gary L Waldron	∐ Delete	TITLE NAMI						☐ Change	Addition	
STREET ADDRESS	2511 SW 2ND AVE			ET ADDRESS							
CITY-ST-ZIP	FORT LAUDERDALE FL PD	Delete	TITLE	- ST-ZIP		80	0003 -02/15	្គេងសូ	G G	Addition	
NAME	MORRISON, STEPHEN B		NAMI				-02/15	/IJUIJ. 30 DO	****15	n uu	
STREET ADDRESS	2511 S.W. 2ND AVE.		4	ET ADDRESS			ጥጥጥ 1 .	30.00	4.1	.0.00	
CITY-ST-ZIP	FT. LAUDERDALE FL VP		<u> </u>	-ST-ZIP		,			Chanca	Addition	
TITLE NAME	BROWN, TROY A.	∀ Delete	TITLE	1					☐ Change	☐ Addition	
STREET ADDRESS	958 SW 149TH TERRACE			ET ADDRESS							
CITY-ST-ZIP	Sunrise FL		CITY	-ST-ZIP							
TITLE	ST WOOD O M	☐ Delete	TITLE						☐ Change	Addition	
NAME STREET ADDRESS	WOOD, G. M 2511 S.W. 2ND AVE.		, NAMI STRE	E Et address							
CITY-ST-ZIP	FT. LAUDERDALE FL			-ST-ZIP							
TITLE	VP	☐ Delete	TITLE						☐ Change	Addition	
NAME	ROBERTO FINALE		NAMI				178				
STREET ADDRESS CITY-ST-ZIP	2511 SW 2ND AVE FORT LAUDERDALE FL			ET ADDRESS -ST-ZIP			a €				
13 I hereby	pertify that the information supplied with t	his filing does not qualify for the	he exe	motion state	d in Section	n 119.07(3)(i) l	Florida Statutes	I further cert	tify that the i	nformation	
indicated	on this report or supplemental report is to poration or the receiver or trustee empower or trustee empower.	rue and accurate and that my	signat	ture shali hav	ve the same	e legal effect a	s if made under i	oath; that ⊢a	m an officer	or director	
	or on an attachment with an address, wi	th all other like empowered.			,		,)	